

DE SOTO

KANSAS

Noise Permit Application

Per § 8-805 of the City Code regulating Noise, the City Council is authorized to allow persons or entities to be exempt from the City's noise restrictions.

Name of Person or Entity requesting Permit: _____

Address permit requested for: _____

Name of responsible parties (name at least two persons) to contact **during event** and phone numbers:

Name: _____ Name: _____

Phone #- _____ Phone #- _____

Type of event request being made for:

Time and dates of event:

Type of noises being generated by event:

The issuance or granting of this permit shall not authorize any person or entity to violate any other Ordinance or City Codes. The City reserves the right to revoke this permit for just cause. This permit will expire on the date and time noted herein.

Date of expiration: _____ Time of expiration: _____

Approved by City Official on _____

Signature Title _____

Printed name

*Provide signed copy to Sheriff's office.

Send to City Clerk

via email: CityClerk@desotoks.us, or mail to 32905 W. 84th St., P.O. Box C, De Soto, KS